

NOV 15 2006

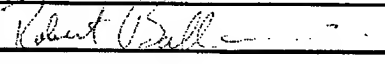
PTO/SB/21 (09-04)

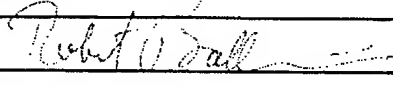
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/523,151
	Filing Date	January 27, 2005
	First Named Inventor	Tomas Carlsson
	Art Unit	1761
	Examiner Name	Milton I. Cano
	Attorney Docket Number	ZNA-PT011
Total Number of Pages in This Submission		

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	VOLPE AND KOENIG, P.C.	
Signature		
Printed name	Robert J. Ballarini	
Date	11/15/06	Reg. No. 48,684

CERTIFICATE OF TRANSMISSION/MAILING			
I hereby certify that this correspondence is being sent Via Facsimile (571-273-8300) addressed to: Examiner Milton I. Cano, Group Art Unit 1761, on the date shown below:			
Signature			
Typed or printed name	Robert J. Ballarini	Date	11/15/06

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**REQUEST FOR WITHDRAWAL
AS ATTORNEY OR AGENT
AND CHANGE OF
CORRESPONDENCE ADDRESS**

Application Number	10/523,151
Filing Date	January 27, 2005
First Named Inventor	Tomas Carlsson
Art Unit	1761
Examiner Name	Milton I. Cano
Attorney Docket Number	ZNA-PT011

**To: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 3624

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

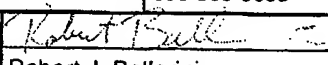
The reasons for this request are:

CORRESPONDENCE ADDRESS

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

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OR:

<input checked="" type="checkbox"/> Firm or Individual Name	Richard G. A. Bone Fish & Richardson, P.C.		
Address	500 Arguello St., Suite 500		
City	Redwood City	State	CA
Country	U.S.A.		
Telephone	650-839-5005	Email	richardbone@fr.com
Signature			
Name	Robert J. Ballarini	Registration No.	48,684
Date	11/15/06	Telephone No.	215-568-6400

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

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